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FACTS AND OBSERVATIONS

RELATING TO

THE ADMINISTRATION

OF

MEDICAL RELIEF TO THE SICK POOR,

In England and Wales.

ADDRESSED TO THE MEMBERS OF THE COMMONS HOUSE OF PARLIAMENT.

LONDON:
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1843.

The writer of the following pages has conversed with many gentlemen chairmen or members of different Boards of Guardians as well as of Parliament, and he has not met with one who did not freely admit that the principles on which the suggestions contained in them are founded, ought to be acted upon, not only for the comfort of the sick poor, but for the advantage of the Guardians, as they would relieve those gentlemen who take an especial interest in the efficient administration of the Poor Laws, from a great part of their difficulties.

It is to be hoped, as the happiness, the safety, and the preservation of the health of the poor, are and ought to be the concern of all good men, whatever may be their political opinions, that some humane and charitable persons will be found, of all parties in the House of Commons, to insist on a full and free inquiry into the facts stated, if they should be doubted, when the necessary proofs in support of each shall be at their service.

27*th* JUNE, 1843.

FACTS AND OBSERVATIONS

RELATING TO THE

ADMINISTRATION OF MEDICAL RELIEF,

&c. &c.

Previously to the present Poor-Law Amendment Act, the sick poor in the midland and southern counties of England were attended by the medical men of their respective parishes, or of the nearest parish, when they were too small singly to support a medical practitioner. As this gentleman attended generally all classes in the neighbourhood, he was well known to the authorities who regulated the affairs of the parish; and the sum granted for his assistance was usually satisfactory to both parties, more particularly as the medical men were allowed to charge a liberal sum extra for every sick pauper of a distant parish who might fall under their care; and although a considerable difference prevailed between the northern and southern counties of England as to the number of sick poor, the manner of their obtaining medical relief and the sums paid to the medical officers, the invaluable principle that each parish or township should if possible have its own doctor, was nearly the same in all.

A careful inquiry into the state of many parishes supports,* and will, if extended further, fully prove these facts, which

* The Provincial Medical and Surgical Association published in 1840 a report on the subject of Poor Law Medical Relief, in which, among much valuable matter, will be found several statements in proof. And many others have been since transmitted to the writer of these pages.

obtain corroborative support from the return called for by Mr. Colville, with respect to certain of the Gilbert Unions, and printed by order of the House of Commons, on the 7th of April, 1813, in one only of which, viz. that of Bedworth, the sum paid to the medical officers can be clearly ascertained; and it appears from it, that 123*l.* were granted to medical men for the care of 10,452 persons; whilst in the Foleshill Union, to which it is presumed by the Assistant Commissioner that Bedworth ought to be added if the Gilbert Unions were abolished, the sum paid to the medical officer is only 138*l.* on 17,235, instead of 218*l.*, which it ought to be, if both unions were treated alike. The lowest sum which ought to be paid to the medical officers of the Foleshill Union, and which a Committee of the House of Commons, in 1838, have acknowledged to be reasonable, is, however, 285*l.*, or double that which the medical officers have been obliged to receive for doing, or saying they would do, a duty which it has been utterly impossible for them to perform. If the same liberality should not be exercised throughout all the independent parishes and Gilbert Unions as at Bedworth, it will only prove that, where hard-hearted men are numerous and not under due control, they will domineer over their more generous and kinder-hearted neighbours. These statements receive further confirmation, and cannot fail to attract greater attention, from the manner in which a few proprietors of collieries, &c., are willing to pay for medical attendance on their workpeople. In one colliery, for example, in Derbyshire, the owners pay a surgeon 30*l.* for the charge of from 80 to 100 workmen; whilst these gentlemen, as belonging to a collective body of Guardians of the Poor, think a similar sum of 30*l.* sufficient for the attendance of the same surgeon upon the poor among 20,000 persons, spread over a district of 15,000 acres.

The Assistant Poor-Law Commissioners, in making the necessary arrangements for their respective unions, in the first instance, did an essential service to the poor, by furnishing many places with medical assistance which had been previously without it, or were supplied in a very indifferent manner; but they would have rendered it much more valuable, if they had not overlooked all the good and useful arrangements which they found existing,

and declared (without a sufficient knowledge of the subject) that medical men were, in many places, and particularly in the southern parts of England, too well paid; and that their salaries must be diminished by one-half, or by at least one-third; whilst they imposed at the same time upon them, double the work, not only in their own vocation, but in keeping books and papers, and making numerous reports, which they had never before been called upon to do, and which, by giving them much trouble, aided in rendering it utterly impossible for many of them to perform their medical duties in an efficient manner.

Boards were formed of guardians drawn from various parts of a union of many thousands of acres in extent, by the greater part of whom the medical officers were often unknown, and the entreaties and the resistance of the medical men, who felt themselves oppressed, were therefore unavailing. The sympathy and the connexion which had previously existed between the poor, the parish authorities and the medical man were in this way destroyed. The guardian living at one extremity of a large union became careless of what might happen to the poor at the other, provided he could diminish the rates; and many acknowledge that they accepted and retain the office, although they rarely attend or vote except for this purpose. A degree of misery has been in consequence entailed on the sick poor of this country, which the Poor-Law Commissioners with every desire to do it, are unable to remove; and which the Secretary of State for the Home Department appears to be unwilling to take upon himself to do, unless under the direction of parliament.

The Assistant Poor-Law Commissioners, in breaking up these old-established connexions, and in joining together a great number of parishes into one union, including a great extent of country, thought it right to recommend, in most instances, the appointment of one medical man for each district, however impossible it was that he could do the duty; and in order to obtain his services at the cheapest rate, these gentlemen, with a carelessness which must always be regretted, sanctioned the issuing of advertisements to an extent altogether unknown before, inviting all persons who called themselves medical men, to contract by tender, for the care of the sick poor; and the

Boards of Guardians accepted, in most instances, the lowest tender, utterly regardless in general, of the fitness of the persons who made the offer. Persons possessing no qualification whatever in medicine or surgery were accepted. Men who had been declared incompetent by the highest medical authorities to take charge of any human being, and scarcely of a beast, were, without inquiry and without hesitation, appointed to take care of the poor in many unions; men near eighty years of age, of known incapacity, notorious drunkards, persons living at so great a distance that they could not, with any reasonable probability, give the poor the attendance they required, were often chosen in preference to men of acknowledged character, actually living on the spot. Such are the evils which have been committed; and thus have the health, the comfort, the happiness of many thousands of our poor and unfortunate fellow-creatures been destroyed, for the sake of saving something less than threepence on each pound paid to the poor-rate! A sum which, whilst it would have given to the poor the best assistance the country could have afforded, is a saving so totally unworthy of, and so disgraceful to a christian country like England, that it may without impropriety be asked, whether there is any other set of men under the sun, be they even the most uninstructed savages, who would have done such a thing? The Huron, the Mohawk, or the Cherokee, cleaves the skull of his aged friend in kindness; he knows that the poor old man cannot provide for himself; he is aware that he cannot protect him, that he must leave him to starve, or to be destroyed by his enemies, or the less ferocious beasts of the field. The savage Indian takes the life of his aged friend or servant suddenly; the blow is unknown to the sufferer; it falls in mercy, and his grave is honoured by those who have sent him, as they fully believe, to join the Great Spirit who rules over another and a better world. The English old man who, at the end of a long life, spent in labour, as much for the benefit of his superior as of himself, is allowed, it is true, by his richer neighbour to die a natural death;—he soothes him with the assurance that he shall have every possible assistance in his extremity; whilst, as a guardian of the poor, he often, perhaps unknowingly, takes the most effectual means he can to prevent his

receiving it, by neither affording him the medicine, nor the support necessary for his relief, nor the person who, if these means were allowed, would know how to use them. A life may be lost, a whole family may be rendered miserable and destitute, but a sixpence or two will have been saved. And we call it a christian country in which we live!

The situation of the female is more distressing. Taken with the pains of labour, with three or four young children hanging on her bed, she is told, after hours of suffering, that she can only be relieved, she can only be saved, through the judgment, the knowledge, the assistance of the parish doctor. The husband sets off a distance of from ten to fifteen, and even twenty miles, (which is positively necessary in many unions at present,) first to the relieving officer, and then to the doctor. After a walk of six or eight hours, he may, perchance, find both; and as the surgeon will have several miles to go, it is possible that the poor woman may have his assistance, if no accident should happen any where else, within twelve or fifteen hours after it has been so urgently wanted. It is probable that on his arrival he may find that she is no more, or that she has suffered in so dreadful a manner as to be for ever unable to perform her duties as a wife or a mother. She may crawl about as long as she may live, a deplorable object of distress to herself, and of disgust to those to whom her situation is known; until, exhausted with suffering and pain, she dies, leaving her little family to the parish, and her despairing husband a ruined, lost and broken-hearted man. Delicacy forbids this most painful subject being further illustrated. It was, however, so fully explained to Mr. G. Lewis, some eighteen months ago, as to cause him to express his horror at such things taking place. He asked whether the two pounds recommended as a payment for the immediate attendance of the nearest medical man in these cases, would prevent, as far as human foresight could do it, such evils; and, on being informed that it would, he said, "You shall have the money: I would not for any consideration such things should happen if money can prevent them." And in the medical order of the 12th of March, 1842, two pounds are ordered to be paid to the union surgeon for a proper attendance on all cases of difficult labour. Mr. G. Lewis deserves the thanks of the whole sex for

his humanity and his kindness on this occasion; and there is no married woman in England who will not do herself honour by rising to receive him the first time he enters a room in which she may be seated. Alas! a chief commissioner may order, but it appears he cannot fully enforce his order, although it may have the approbation of the Secretary of State attached to it. There is no man more humane, more feeling towards the unfortunate woman in such distress, than Sir James Graham. Nevertheless, the Secretary of State and the Poor-Law Commissioner might both be almost as well the reverse of what they are, for their order is very commonly evaded.

Some Boards of Guardians have proper feelings on this point, and have honestly allowed the money; others, again, have professed to give it, but have deducted it from the annual salary heretofore received by the medical man; whilst a third set have declined paying the least attention to it. All this is perfectly well known to the Poor-Law Commissioners and to the Secretary of State, but before they effectually interfere with the Boards of Guardians, it seems to be desirable that the sense of the House of Commons should be expressed upon it. The Speaker of that House believes himself to be a christian man, the organ of a body usually supposed to have human feelings and manly sympathies; but he little knows that every one of the evils alluded to have been suffered on the one hand and inflicted on the other, within his own county, within sixty miles of London; nay, under the very windows of the house in which he so honourably and so worthily presides. What the feelings of a Peer, or of a member of the House of Commons, may be, can be known only to those who fill these elevated situations; but if a more ordinary set of gentlemen were to sit night after night disputing on a hundred clauses of a Poor-Law Bill, which did not contain one clause ensuring to the poor, good and sufficient medical relief when suffering from sickness and distress of body of every kind, the more common, but not the less respectable part of the community, might think them wanting in some of those attributes, the assemblage of which constitutes a christian or even a heathen gentleman.

The Poor-Law Commissioners interfered and prevented

further advertisements for tenders to contract for the sick poor, but, unfortunately, when it was too late to remedy the evil; for the Boards of Guardians had had time, during several successive years, to ascertain the lowest sum an ignorant or distressed medical man would take, to save himself from starvation, by destroying others, under the insidious proposition of taking care of them; and they advertised for doctors at the lowest sum they thought they could find a person to accept. Such persons were employed in many places; and when the unfortunate men who had perpetrated all sorts of horrors, overwhelmed in their turn by their necessities, were obliged to abscond for fear of the county gaol, many of the Boards of Guardians endeavoured to force the respectable practitioners of their neighbourhood to undertake the duty on similar terms. No threats however unreasonable, no efforts however unfair, have been spared against them in many places. The consequence has been, that several have been forced to submit, to save themselves and their families from ruin; and have been obliged to say they would endeavour to do a duty they knew they could not perform, and which, in many places, has not been done; and they are ready to attest this awful fact before a committee of the House of Commons, or other competent authority.

The soldier, the sailor, and even the felon in a county gaol, are protected by the legislature and the government from an unqualified practitioner. The rich can protect themselves, but the poor were left at the mercy of the most ignorant pretender in physic and surgery whom the respective Boards of Guardians were pleased to hire for their nominal service. The Poor-Law Commissioners here also interfered; and directed, in their order of the 12th of March, 1842, that the medical officers of unions should possess the same qualifications as those which are required by act of parliament from officers appointed to take the charge of felons in a prison, but they have not been able to carry their order into full effect; good men pay attention to it, other men laugh at it. The Commissioners when appealed to, whilst they lament the evil, do not feel that it is always expedient to enforce their own order: and, in several places persons are now employed as surgeons, having only the qualification of an apothe-

cary, although duly-qualified persons live on the spot, and may be procured for a reasonable remuneration.

The qualifications which ought to be required from a union medical officer, should be licences in physic and in pharmacy, in surgery and in midwifery, from any of the legally constituded bodies in the United Kingdom entitled to grant them. It has been argued that those gentlemen who have been for some time in practice without any qualification, should be continued in office, provided they were so employed previously to the issuing of the order of the Poor Law Commissioners of the 12th March, 1842. It is notorious, however, that persons have been employed to take charge of the poor who are thoroughly unfit for these offices, and although many gentlemen, who have not sought the necessary qualifications, are really good and able men, there cannot be an arbitrary distinction made amongst them. Nor can testimonials be received from private persons, however eminent, as long as they can be obtained in a legitimate manner from the known public authorities. The only just way of acting towards these gentlemen was, and is, to give them time to obtain the proper testimonials of their fitness. Scotch and Irish diplomas in surgery are not received at present by the Poor-Law Commissioners. Mr. G. Lewis, when the only Commissioner in London, was willing, however, to remove the restriction if in his power; and permitted the President of the Royal College of Surgeons of London to see the legal officer of the Poor-Law Commission with him on this point. This gentleman proved inexorable; and it has been fortunate hitherto for the medical men practising surgery in England that he was so positive; for, if he had yielded, so great an influx of young Scotch gentlemen desirous of gaining experience and perchance a livelihood, would, in all probability, it is said, have followed the removal of the restriction, that the Boards of Guardians, in the northern counties in particular, might have had their services on their own terms. It is therefore necessary that the sum to be paid for the ordinary services of the parish surgeon should be fixed at the time the restriction is removed; and as there are restrictions in Ireland and in Scotland affecting gentlemen who hold the diploma of the London College of Surgeons, which are equally unfavourable to

them when in these countries, the whole should be abrogated together.

Where the guardians have to pay not less than a certain sum, although they ought to be empowered to pay as much more as they please, they will take care to get the best men they can obtain for their money, and they will not seek for unqualified or insufficient persons. They will have good medicines for their poor, instead of cheap and bad ones, skilful practitioners instead of ignorant or inexperienced men of desperate fortunes, ready to do anything in the hope of gaining even a precarious subsistence; and they will be able to sleep in peace, with the satisfaction of having honestly given good things to the poor, which is "lending to the Lord." In districts where well-educated medical men are scarce, the nearest and best qualified men amongst those who have little pretensions, will be employed; and a reasonable payment will soon bring good men where none are to be found at present.

The Council of the College of Surgeons, believing that the order restricting the employment in Poor-Law Unions to gentlemen properly qualified, had been mainly carried into effect, through the instrumentality of their president, have not thought it right to refuse an examination to gentlemen who have been many years in practice, but whose early education had not been conducted in exact conformity with their regulations. They permitted them, therefore, to submit their claims, and admitted them for examination, whenever they found that they had had any reasonable degree of surgical education in early life; and considered that the opportunities of acquiring such knowledge which their practice had offered to them, might possibly compensate for any other previous deficiency in their surgical studies. The examinations of these gentlemen have been very practical, and those who feel they possess the attainments required, are not prevented from obtaining the necessary proof of their competency. The Council of the College of Surgeons, in thus acting, have done themselves great honour. They have acted justly towards the poor, and fairly towards the profession at large. If they had relaxed their regulations in favour of every young pretender in surgery who might desire the honour of their

diploma, they would have deserved every species of obloquy which could have been cast upon them; but they have done nothing of the kind. They have admitted men only on the grounds stated, and all of whom have been more than ten years in the practice of their profession.

It has been stated from grave authority, that the medical man who attends the richer inhabitants of a district, and who oftentimes receives as little for his trouble as they can possibly give him, ought to attend and to supply the poor with medicines for little or nothing. It is so well known as not to be disputed, that no men do more kind charitable and humane acts than medical men; that none, not even clergymen, give up more of their time to the poor. They do it from the purest principles of charity; but why they should do more as a matter of right than men of any other profession or occupation, has never been shown. They pay their share of the poor-rate like every nobleman, every yeoman, and every tradesman in the district, and why should they do more? The nobleman does not refrain from receiving his rent from a poor man with a large family; the yeoman does not supply the poor man with flour, except at the market price; the butcher does not give him meat; the upholsterer does not furnish him with a bed; the clergyman does not even marry him, or christen his children without a fee, nor take only half his tithe. All men may do all these things occasionally, nay, it is to be hoped, frequently, but the medical man alone is called upon to do them always, because it is said, attending on the poor may, perchance, give him an opportunity of obtaining the rich if he should be successful; although it also enables the rich man to avoid him, if he should be unfortunate in so many cases as to raise a doubt of his competency. The attendance on the poor of a district is not merely an exercise of the mind, which actually costs nothing; it is often a matter of great labour, of great personal inconvenience and annoyance. The medicines for the poor, which ought to be of the same quality as those for the rich, are high in price; and the duty cannot in an ordinary district, be thoroughly done without an extra horse. If these things are well considered, it will be found that Boards of Guardians are more than ordinarily liberal to medical men, when they permit

them to have a very small compensation for their labour after their necessary expenses have been paid; and in many places the medical man actually works for nothing.

The payments made to gentlemen employed as clerks to the Boards of Guardians, and even as auditors of their accounts, are estimated on a different principle; they are often infinitely larger than those awarded to the medical men in the same union, although they never can have one-tenth part of the duty to perform; being a convincing proof that the charge of their money, or the saving of trouble to themselves, are points which have received the most favourable consideration from a majority of many of the Boards of Guardians. The sum total of the money collected in England and Wales, on account of the maintenance of paupers, out-door relief, and other incidental charges, is 6,754,404*l.*, according to the ninth or last Annual Report of the Poor Law Commissioners; and less than three-pence in the pound on which, will give a sum larger than is neeessary (in addition to that which is already paid) to satisfy the medical profession, and to supply the poor with that proper and just assistance which their unhappy state deserves at the hands of their more fortunate neighbours.

From Lady-day, 1841, to Lady-day, 1842, the sum paid to the surgeons of unions, for the medical relief given to the poor, was 153,481*l.*, according to the last or ninth Annual Report of the Poor-Law Commissioners; and from Lady-day, 1842, to Lady-day, 1843, it appears, from the return called for by Colonel Wood, and printed by order of the House of Commons, that this sum was reduced to 139,784*l.*; and as the payments said to have been made have been often much exaggerated by the clerks of the different unions, so as to be, in some few instances, from one to even five times as much as the amount actually paid, the aggregate sum of 139,784*l.* is probably in excess by several thousand pounds, more especially as the annual salary or stipend allowed to each officer has been reduced, in many instances, since last March.

The rich man can have the opinion and assistance of many medical men, when suffering from disease, the poor man can have only the aid of the one person furnished by the parish or the union. It is, therefore, of the utmost importance to the poor, that

this person should be a man of experience, of known character in his profession, one on whom their richer neighbours do at the time rely with confidence; the person in fact, in whose hands they place their lives, when ill themselves. The employment of such persons would be just, honest, and humane. It is, however, what many of the guardians of the poor have not done. They have unfortunately dealt with the poor, not according to the Scriptures, that they should "do as they would be done by;" and it is for civilized and christian men to say whether they shall be permitted any longer to do such things. Amongst the Boards of Guardians who have committed this grievous error, there are ranked noblemen, gentlemen, and yeomen of the highest characters in their respective stations. Many of these loudly lament that the Poor-Law Commissioners have fixed no minimum payment for the services of the medical officers of unions. They deplore the situation in which they are placed, of having to contend against hard-hearted men, who take advantage of this defect in the law, and outvote them on every occasion in which the question of remuneration to medical men is raised. Many of these noblemen and gentlemen have retired from their respective Boards of Guardians, in disgust with the cruelty exercised in this manner towards the sick poor, and in which they have been forced to acquiesce, whilst others, greatly distressed at being unwillingly obliged to countenance such evils, have applied to the Poor Law Commissioners for redress. It will naturally be asked, How is it that such proceedings are allowed to continue? whether it is that they are not known to the Poor-Law Commissioners, or the Secretary of State for the Home Department?—whether they approve or only suffer them to continue, for want of the power to arrest them? The answer must be given, that there are no men more humanely disposed, more desirous of doing away with these evils than the Poor-Law Commissioners and the Secretary of State; and yet they have suffered, and do suffer them to continue, in many parts of the country. They have made orders and regulations, with the evident intention of putting a stop to these evils, but they have not been pleased to carry them out. They are supposed to possess an authority which it would appear they

do not think it right to exercise, and they have been induced to suggest and advise, and even to submit, when they ought to have been able to declare and to enforce. In the first years of the Poor-Law Commission, all authority was centralized, and placed in the hands of the Poor-Law Commissioners; within the last year it appears, with respect to the sick poor, to have departed from them in fact, although not in word, and to be centered in the different Boards of Guardians, each regulating for its own district, and the restraints of the Poor-Law Amendment Act have been materially relaxed on many points, it is said, with respect to the aged and infirm poor. Advantage is, however, taken of these restraints when it is agreeable to the Boards of Guardians to adopt them with respect to the sick poor and the medical officers of unions; and the laxity with which such deviations from the good intentions of the Poor-Law Commissioners is visited, enables them to contemn and evade all and every regulation which may not be according to their wishes.

The error seems to be with the legislature. The management of the sick poor should be regulated by such just provisions as are necessary for their safety and preservation, and which may be made by additional clauses to the Act; or if the Secretary of State and the Poor-Law Commissioners have already the power to make and to carry out such regulations and provisions as may be necessary for their welfare, the Commons House of Parliament will perhaps call upon them to reconsider this subject, and to take such further steps in regard to the sick poor as shall effectually procure for them a more liberal, humane, and christian treatment.

The Ross Union, in Herefordshire, contains 55,320 acres; 14,771 persons, and a poor-house, with 120 inmates on the average. Four medical men were employed, who were paid 318*l.* a-year: the lowest sum they ought to receive being 400*l.* The Board of Guardians, desirous this year of diminishing this even too small sum, directed that ONE doctor only should be employed for the whole union, containing these 55,320 acres, and 14,771 persons, at a salary of 220*l.* They defied all the orders of the Poor-Law Commissioners, and advertised for the doctor in the London, Edinburgh, and provincial papers, thus showing what

a Board of Guardians will do in 1843. The Commissioners honestly refused to permit such an arrangement, and the old medical officers, for the sake of peace, declared themselves willing to submit to any thing the Poor-Law Commissioners would decide upon, and wrote to them accordingly. The Poor-Law Commissioners recommended "mutual concession" between guardians and doctors. The medical men submitted, and offered to take 250*l.* instead of 318*l.* This the guardians refused, and proposed to employ three strangers instead of one. This the Poor-Law Commissioners also refused to allow; but they informed the old medical officers at the same time that they could not enforce a higher rate of payment than the guardians should think fit to give. The guardians then issued another advertisement, fixing the price they would pay for each of four districts into which the union was divided. Several unfortunate candidates, and there are many such in all professions, appeared ready to do anything with the hope of obtaining even a livelihood; and three of the old surgeons, trusting that something would be done by the legislature on the subject, yielded, as preferable to encouraging the influx of so many strangers; and they have again undertaken a duty which cannot properly be performed for the money. The fourth place is filled by a stranger, who is thus unnecessarily introduced, to the probable detriment of the existing members of the profession, and of the poor, if he should fail to succeed in obtaining a living.

In the South Molton Union, the Board of Guardians, at Lady-day, 1840, appointed the medical officers without naming the salaries, which they left to be settled by the Poor-Law Commissioners; and Colonel Wade, then the Assistant Poor-Law Commissioner, after a rigid inquiry into the state of the union, fixed the salary for each medical district. That for the third district, containing two parishes, was fixed at 15*l.* exclusive of midwifery, the population being 519, spread over 5,400 acres, the extreme distance from the residence of the surgeon being five miles and a half. In the spring of the present year, the guardians thought fit to add a third parish to the district, doubling the number of the population to 1,094, and the estimated number of acres to 11,000, the extreme distance from the home of the medical officer

being augmented to six miles and a half, for which additional duty they offered 2*l.*; that is, to increase the salary from 15*l.* to 17*l.*, having doubled the work.

The surgeon objected, and asked 23*l.* exclusive of the midwifery, and according to the medical order: on the 6th of April 1843, the clerk of the union signified to the surgeon the intention of the guardians to request the Poor-Law Commissioners to fix the amount of remuneration which ought to be paid to him; and the guardians and the surgeon each laid their statements before the Poor-Law Commissioners. On the 29th of April, the clerk of the union informed the surgeon, that the Poor-Law Commissioners had expressed a reluctance to interfere in fixing the amount, and hoped the parties would settle it themselves; in consequence of which, the guardians would increase the payment of each midwifery case from 12*s.* 6*d.* to 1*l.* to which pound the doctor would have been justly entitled from the distance in the greater number of cases, and which would, in fact, have added but little to his salary. He therefore declined, and requested the Poor-Law Commissioners would fix the just remuneration for his ordinary services, and that he would abide by their medical order for the midwifery cases and accidents. This the clerk of the union informed him the Poor-Law Commissioners declined to do, and that the Board considered this answer (from the Commissioners) as affirming the sum, proposed by them, viz. a salary of 17*l.* and 1*l.* for each midwifery case. The surgeon, who had received 15*l.* and 1*l.* for each midwifery case for one-half the work, did not believe the Poor-Law Commissioners could mean any such thing; he therefore addressed the Poor-Law Commissioners, stating that he had not requested them to "interfere authoritatively" on the subject, but merely to say as a matter of arbitration, both parties having referred to them, what ought to be the proper salary for a specific district.

These statements are already before the public, and if it is not thought expedient that the Poor-Law Commissioners should give an opinion on a question so trifling in itself, but which is of such vital importance to the sick poor, their Assistant-Commissioner having given it authoritatively in their name in 1840, they cannot be surprised at many persons taking the liberty to

doubt whether there can be much use in their continuing longer in office, unless such power is granted to them.

The President and Council of the Royal College of Surgeons addressed the Secretary of State, Lord John Russell, on the 29th July, 1835, on the grievances complained of by the medical officers of unions instituted under the Poor-Law Act, which was referred to the then chief Poor-Law Commissioner, Mr. Frankland Lewis, and his reply was transmitted by Lord John Russell to the President and Council of the College in the following August. This reply was unsatisfactory, and the Council, finding that they were not likely to obtain their object in this way, deputed one of their body in whom Mr. Frankland Lewis had confidence, and to whom several of the Assistant Poor-Law Commissioners were known, to take charge of this subject, and to endeavour to effect by private exertion and entreaty what could not be accomplished by public representation. In the meanwhile many medical practitioners associated themselves together, and formed societies, such as, The Provincial Medical and Surgical Association, The British Medical Association, &c. &c. These bodies addressed the Poor-Law Commissioners and the Secretary of State, and various individuals made representations to the minister and other members of the government. The Committee of the House of Commons which sat in 1838 examined several of these gentlemen; they inquired into the circumstances attendant on the medical relief of the poor; but the statements and opinions of all parties were at that time so contradictory and embarrassing, that the Committee, although admitting the fact of the necessity which existed for a more liberal rate of payment to medical men for their services, left the matter to be settled by the Poor-Law Commissioners. These gentlemen, moved at last by the various entreaties and representations with which they were assailed, seemed to think that it would be wise and politic to yield to the wishes of the whole medical profession, and by fixing a fair, yet reasonable rate of payment for their extraordinary as well as for their ordinary services, to unite these gentlemen with them in their efforts to carry out the Amended Poor-Law Act, for the good of the poor and the advantage of the public. Mr. G. Lewis, the only Poor-Law Commissioner

then in London, thought it right to communicate with the President of the Royal College of Surgeons on the subject of the proper sums to be granted in particular cases, as well as on the provisions necessary to be made with respect to the qualification of medical men, as a consequence of these improvements.

The medical order of the 12th of March, 1842, settled the rate of payment for accidents and midwifery cases in a fair and reasonable manner; but it left the salaries to be given for the charge of the workhouses, and for the medical care of the outdoor poor in as unsatisfactory a state as before; and the good which would have resulted from this order of the 12th March, 1842, as the half of a whole measure, has been nearly lost for want of the remainder. It must, however, be stated, to the high praise of the Poor-Law Commissioner, Mr. G. Lewis, that although he and the President of the Royal College of Surgeons could not agree as to the exact sum which ought to be paid in addition for the *ordinary* services of the medical officers of unions, he admitted most freely that these gentlemen were under paid, and suggested the possibility of his being able to augment the whole of the money then granted by one-third. The President of the College of Surgeons declared, that he could not recommend it to the Council to sanction a less sum than two-thirds, which would be barely sufficient. Mr. G. Lewis, whose conduct to the medical profession has been such as to deserve the thanks of every medical man in the empire, then proposed, as he did not feel he could grant the whole sum said to be necessary without higher authority, (although he admitted that the amount was not unreasonable,) that the Secretary of State should be requested to hear the statements on both sides, and decide as he might think fit. Sir James Graham was pleased to go through the whole of the points under discussion, and he appeared to come to the conclusion that the amount proposed by the President of the College of Surgeons was reasonable, and might be granted with propriety. It would serve no good purpose to pursue this part of the subject further, although the Secretary of State has, unfortunately for the sick poor, not thought it right to authorize these necessary alterations.

A careful investigation, made from the observation of several

medical men, unacquainted with each other, shows that the sum which ought to be paid for attendance on the poor, and for the medicines given to them in a workhouse, must differ according to the nature of its inmates. For aged, infirm, and sick persons, the sum granted should not be less than 34*l.* per cent. When the workhouse is filled by children, 15 per cent. may be sufficient, and from 20 to 30 per cent. would be a proper remuneration where all classes are mixed together, in equal proportions. In some workhouses these sums are at present allowed; and there is no good reason why the payment for medical services should not be in all alike.

The medical order of the 12th March, 1842, is incomplete, and unjust in some points, unless such additional provision is made, for payment is only granted by it for cases of operation and accident, provided the sufferers are attended at their own homes. Nothing is allowed for them if they are taken to the sick-wards of the workhouse, although, it is presumed, it was intended by the Poor-Law Commissioners, when they framed this order, that the surgeon of the workhouse should be reasonably paid for his labour, including a fair proportion of such operations and accidents; and a direct and separate payment was refused for them, that he might have no encouragement to turn his parish workhouse into a sort of public hospital. The Poor-Law Commissioners were desirous that all bad cases and severe accidents, requiring operations, should be sent if circumstances would permit, to the county hospitals. They were sensible that, by studding the country over with small workhouse hospitals, and by dividing the most serious cases amongst them, they would render good surgical instruction almost unattainable anywhere, even in the largest towns, or in the metropolis. They refrained, therefore, from paying for such cases, except where it was absolutely necessary that the sufferers should remain at their own homes; and, as far as it lay in their power, they encouraged these unfortunate persons being sent to the great hospitals, by allowing subscriptions to be paid for the support of these institutions, and sums to be charged for the conveyance of persons to them.

The same careful investigation which has led to the minimum sums which ought to be granted for all workhouses, has also

ascertained that the lowest sum which ought to be paid for a town parish above 10,000 persons, is five farthings per head on the whole population, exclusive of the sums granted by the medical order of the 12th March, 1842; three-halfpence when the population is between 7000 and 10,000; and from seven farthings to twopence per head when under 7000.

In England the great remedy for the removal and cure of all evil, is money, and it is the only thing wanting to obtain for the poor efficient medical relief. Let the principle of efficient payment be once established, and every detail and everything else will follow as distinctly as an effect follows its cause. For instance, great differences of opinion have existed as to the size of a rural district which ought to be apportioned to one medical man. The Poor-Law Commissioners have been pleased to fix it at not more than 15,000 acres, including a workhouse. They might, with greater advantage to the poor, have said under 10,000 acres, exclusive of a workhouse. They have met with great difficulties in attempting to enforce even this order, simply because they have not made it the interest of the guardians to do it; let them, however, declare that only 3*d.* per head shall be paid on the amount of the population, in the midland and southern counties, when the surgeon travels less than three miles from his own door, 4½*d.* when he goes beyond three and under five miles, and 6*d.* per head when he goes beyond five miles, and the matter will be settled. The difference between 3*d.* and 6*d.* would do what neither persuasion nor order have been able to effect; and the rural districts, before Midsummer 1844, would all be reduced, where it could by any possibility be done, to threepenny distances. This may not be pleasing to all the medical men now employed, but it will be if carried into effect, an inestimable advantage to the poor. It will nearly double the number of medical men employed at present; a return will be made to the good part of the old order of things; the poor and the members of the medical profession will be satisfied; and the rate-payer will not only not be injured, but will in many places be relieved from a part of his payments.

It has been proposed that each poor man should choose his own doctor; but, as the medical man must have the power to

recommend allowances of bread, meat, wine, spirits, porter, and other necessaries which ought to be given in kind, and not in money, as is generally done at present to those who stand in absolute need of them, the good government of a parish cannot admit of their being able to outbid each other by augmenting the quantity of these articles; for although the surgeon ought only to be empowered to recommend, and the guardians alone should have the right of granting, yet the recommendation of the medical man should never be refused unless under very extraordinary circumstances, which should be reported to the superior authorities.

The medical man should not be appointed by the guardians, as heretofore, but be elected by the rate-payers of his own district, whether it consists of one or of many parishes; and he ought to be a permanent officer like the chaplain and clerk, removable only, with the sanction of the Poor-Law Commissioners, for improper conduct. The surgeon of a district, or of a workhouse, has other and important duties to perform besides attending on the sick poor. The Poor-Law Commissioners are so perfectly aware of this, that they have already ordained that he should be a permanent officer; but their order is evaded, and there is scarcely a district in which it is obeyed. The Committee of the House of Commons, which sat in 1838, pointed out in their Report several additions which ought to be made to his immediate medical duties towards the poor; and, Mr. Chadwick has recommended, in his General Report on the Sanitary Condition of the Labouring Population of Great Britain, that a district medical officer should be appointed, independent of private practice, for the purpose of collecting information, and for the promotion of the means necessary to prevent disease. He proposes that these inspectors should be taken from the half-pay officers of the public service accustomed to such duties, by which a considerable saving might be made; but he adds, p. 343, "It would scarcely be practicable to ensure as certain and well directed an examination of the residences of the labouring classes as I conceive may be ensured from the medical officers of the unions." In these conclusions he is right. The appointment of an independent medical inspector to each district to which an Assistant Poor-Law Commissioner is attached would be an inappreciable advantage to the

poor. It would relieve the commissioner of all his difficulties respecting them: he would affix the necessary and proper sums to be paid to the medical men, he would see that they did their duties correctly, for no one but a medical man can know when they are really and truly done, and no surgeon should be removed without his sanction; for the medical officers of unions dare not venture to act justly and honestly towards the poor on many points unless they are permanently appointed for as long a period as they shall conduct themselves properly. They dare not make a report on any subject connected with the health of the poor, which might affect the property or proceedings of any influential person, even if they should do it under the authority of a Board of Guardians, for they would eventually suffer for it.

Mr. Chadwick very properly recommends that this sanitary inspection and report shall be required of the medical officers of unions as an extra duty, for the due performance of which they should be fairly remunerated; but he does not intimate what he thinks would be a fair remuneration. It is to be hoped that this may not be left to the Boards of Guardians to determine, but to the authorities to whom the regulation of the matter may be entrusted. At p. 349, he says, "Medical officers, as private practitioners, are often dependent for their important private practice, and even for their offices, on persons whom its strict performance might subject to expense, or place in the position of defendants. On this topic, a large mass of evidence might be adduced, showing the unreasonableness of expecting private practitioners to compromise their own interests by conflicts for the public protection with persons on whom they are dependent."

These passages, taken from Mr. Chadwick's book, are the best proofs, if any were wanting, to show the absolute necessity which exists, that the office of the medical man should be held during good behaviour, and that his remuneration should be fixed by the Commissioners, and not by the guardians: and he will be gratified by reading the following additional facts, which have been selected from among many, in support of his opinions.

In one of the London districts, several persons had suffered from fever, and some had died in an alley in which all sorts of filth were permitted to accumulate, and which required to be

thoroughly cleansed and drained. The parish surgeon stated to the Board of Guardians the necessity which existed for this being done, and received a private intimation in return, that the alley belonged to one of the guardians, and that if he said anything more on the subject, he would be removed from his office on the next election. It probably was insinuated that such a state of things was perhaps intended by Providence for the prevention of the increase of the population among the poor, and that the natural order of events ought not to be interfered with, merely to save a little time and medicine to the doctor.

In other places, where the parish surgeon has found dozens of both sexes, and of all ages lying almost naked on the floor, even in the workhouses, and has desired to have these horrors mitigated, he has been told to mind his own particular business, if he wished to retain his office. The master and mistress of a workhouse often feel that he is under their authority, and order the poor in and out of the sick-wards, in many places, as they please ; and he is obliged to submit, or be dismissed on the first opportunity. If the medical man was on the contrary a permanent officer, none of these evils would occur. He would without fear make such representations to the proper authorities as might be necessary, and the poor and the public would be well served.

There can be no doubt that in large districts, such as exist in the Metropolis and its neighbourhood, some parts must be more healthy than others, the inhabitants richer, and requiring less aid from the parish surgeon ; but, if the calculation on each point is made on the whole district, there will be little difficulty in duly apportioning the sum each medical officer should receive for particular parts. In some places, as in Greenwich, there are dispensaries, which take off a great number of the poor that the parish doctors would have to attend, if no such charitable institutions existed ; and they ought not to receive the full amount of money to be charged on the whole population. Nevertheless, it ought to be charged to the district, or union, and the Poor-Law Commissioners should decide upon the sum to be given to the medical officers, and to the dispensary respectively ; for such institutions are usually poor and require assistance, which, when allotted in this manner, would come from all classes of persons according to their

means, and render the charity infinitely more useful. It should also be borne in mind that the sums stated to be necessary are estimated for the districts in which the least labour, and outlay for medicines are required; and the parish surgeons in poorer and more unhealthy places waive their claim to a higher compensation, to which they are fully entitled, for the purpose of disembarrassing the question of payment of all difficulty, with the view of having it finally settled.

The investigations to which these circumstances may give rise, and the decisions consequent upon them, appear to be a part of the proper duties of a Central Board; and there can be no doubt whatever, that if the scale of payments was once settled, the cases for reference would be comparatively few, and that a large portion of the business which, it is said, now embarrasses the persons employed at the Poor-Law Office, would cease.

Opinions have been much divided as to whether a payment per head on the whole population, or a payment according to what is called a pauper list, and a per casual-case system, is the best. The Assistant Poor-Law Commissioners, the medical officers, and the Boards of Guardians, formerly preferred the latter; but it is not the best for the poor, although it is for the doctor, and it is therefore objectionable. Colonel Wade, an officer among the most distinguished of his rank in the army, and now the deputy adjutant-general in Ireland, filled, for some four or five years, the office of Assistant Poor-Law Commissioner. No man could be better fitted for the duties of the office, nor more practically acquainted with them. He knew from experience, the utility of good medical assistance, and he endeavoured to obtain it for the poor in his district.

The Provincial Medical Association, in their report on poor-law medical relief, in commenting on the manner in which his duties were performed, pay him the highest compliment he could desire, in saying, He seems to have steadily pursued an opposite course to that usually recommended and adopted by his colleagues. He never allowed a poor man to be neglected; he reduced the size of all his medical districts, and he endeavoured to pay medical men in a reasonable, if not a liberal manner. He had, when in the West of England, eleven medical

officers at one time under courts of inquiry for neglect of duty, and dismissed several of them; and was so conscientiously desirous of being assured that he had acted justly towards them, that he sent their respective cases to the then President of the Royal College of Surgeons, requesting to have his opinion whether he had judged correctly; but when asked in return whether he thought these gentlemen had been paid in a reasonable manner for the services he required of them, replied, 'it is that which grieves me; for I must admit that, with regard to payment, they have been, and are, *cruelly* treated.'"

Colonel Wade was one of those who advocated, in the first instance, the pauper list and per-case system, considering that the return in money to the medical officer ought to be by this plan equal to the sums stated to be necessary on the whole population by the per-head system. He believed that, as far as money was concerned, it was a matter of indifference which mode of payment was selected; but he at last came to the conclusion, from great practical experience, and from thorough conviction of its being better for the poor, that the payment per head on the population was the safest, and the best for their interests, although it was not the best for the union surgeon.

The Boards of Guardians are, although on a different principle, fast coming to the same conclusion that an annual salary, fixed arbitrarily, is better than a payment per pauper list and casual case, and particularly in seasons of illness and distress, when they would undoubtedly have to pay much more on the per-case system, if they allowed anything like a reasonable sum, than by fixed salary. It may be observed that, whether the poor have sufficient advice and good medicines does not seem to cause any embarrassment, or give rise to any very serious consideration in this calculation; nevertheless these gentlemen have willingly paid their share of 600,000*l.* a-year interest on twenty millions granted by parliament for the emancipation of the negro slaves in the British colonies, and they hesitate to pay between two and three pence in the pound additional on the poor-rate, to procure for their own suffering poor, good although barely sufficient medical relief in the hour of their distress.

A very casual inspection of the return called for by Col.

T. Wood, and ordered to be printed on the 10th April, 1843, will show that there has been no settled plan of payment for the ordinary services of the union surgeons. Under Mr. Clements, the sum paid per head on a population of 2,655,314, has been about a penny; under Mr. Parker, with a population of 1,016,573, it has been fivepence. Under Sir J. Walsham, on 1,225,820, it has been fourpence halfpenny. Under Mr. Day, on 1,054,065, it has been twopence. Under Mr. Hawley, it has been one penny three farthings, on nearly the same number of persons, spread over a less number of acres, than under Mr. Parker, who pays fivepence.

	Population.		Acres.
Mr. Hawley has . . .	1,131,174,	spread over	4,562,982.
Mr. Parker has	1,016,573,	„ „ „	3,438,864.

The total number of in and out-door paupers, for one quarter, ending Lady-day, 1842, in the unions under the superintendence of Mr. Hawley, is 94,993, according to the return called for by Mr. Wallace, and printed, by order of the House of Commons, on the 28th of March, 1843; whilst there are 120,356, under Mr. Parker, which number may be fairly considered to be the same for each quarter throughout the year.

It may be concluded, that, as the union surgeons in Mr. Parker's district have one-fourth more paupers to attend to, they will have one-fourth more sick under their care than in the northern, or Mr. Hawley's district; but, as the northern surgeons are nearly one-fourth less numerous, and have one million, or one-fourth more acres to travel over, the circumstances of the two districts may fairly be considered as equal, without noticing the badness of the bye-roads, or the greater inclemency of the northern winters, which renders the length of medical life so much more precarious in the rural districts of the north. Nevertheless, these northern gentlemen receive only one-third of the sum paid to their southern brethren, which is not an equitable proceeding, and cannot, it is conceived, be supported by any argument. If the medical districts in the north were diminished in size, and the number of sick poor should not be found to bear the same relative proportion to the population as in the south, the amount of payment per head on the population

might with great propriety be diminished in an equal proportion; but it is not a reason for declining to adopt all scale of payment. Mr. Parker has under his superintendence Berks, Bucks, Dorset, Gloucester, Oxford, South Hants, parts of Surrey, Sussex, and Wilts. Mr. Hawley has Cumberland, Durham, Northumberland, a part of Westmoreland and of Yorkshire, and one union in Lancashire.

The Poor-Law Commissioners, in their ninth and last Annual Report, have adverted to this discrepancy, and have given a comparative table of the payments made in six counties,—in Durham, Lancashire, and Cornwall, as opposed to Sussex, Berks, and Hereford. They show that it is in the three first to the three second as $3\frac{1}{2}d.$ is to $14d.$; and with the view apparently of accounting for this great difference, and for that which exists between the rate of payment in one district in the northern counties, when compared with another even in the same county, they add, that "the voluntary arrangements made for the medical attendance on the poor are in some districts such as to relieve the union medical officers of a large part of their ordinary duties. Thus, in the mining districts of Cornwall and South Wales, there are well supported medical clubs for the working people: so, in the manufacturing towns of Lancashire and the West Riding of York, there are commonly large dispensaries maintained by voluntary subscriptions."

After this statement from authority, which is at variance with common report, it became necessary to ascertain whether the Commissioners might not be under some misapprehension as to the union medical officer being relieved from any part of his ordinary duties in the northern counties by the means indicated, and the union surgeons of 112 poor-law districts in Northumberland, Durham, Westmoreland, Cumberland, the North, East, and West Ridings of Yorkshire, Chester and Derby, were written to for this purpose. It appears, from the answers of these gentlemen, that, although the statement of the Poor-Law Commissioners is correct, as founded on the reports they received in 1839, and have lately printed, that these reports do not apply in 1843. The dispensaries alluded to were formerly paid by the parishes or townships for the medical relief they gave to the

sick poor, even to the amount of 100*l.* a-year at Macclesfield, 150*l.* at Huddersfield, Preston, &c. &c.; but these payments have been withdrawn since these reports were made in almost every instance, and all persons who receive parish relief are almost invariably refused assistance from the dispensaries. Kendal is an exception; but there the dispensary is so poor, that general relief cannot long be granted, unless it should receive some particular pecuniary support. With respect to the northern collieries, and to the factories in Lancashire and in the West Riding of Yorkshire, the common custom is, for the owners to pay only for the accidents, and not for illness; and as they do not always employ the surgeon of the poor-law union in cases of accident, this gentleman is by so much the worse, inasmuch as the Boards of Guardians must under the medical order of the 12th March, 1842, have paid him extra for the accident or operation, he being very probably in attendance, for little or almost nothing, on a case of illness in the village in which it had occurred. The London Mining Company, near Stanhope, under the presidency of Mr. Masterman, M.P. for London, is an exception to this general custom, as they employ a surgeon to attend their workpeople under all circumstances.

It is then proved, by the statements of nearly all the surgeons of the northern unions, that the dispensaries do not generally relieve them from any essential part of their duties,—that the collieries and factories add materially to them, in spite of any associations which may here and there be formed among the workpeople for medical relief for a certain time, but who all fall on the union surgeons, if their complaints be of long continuance; and who entail upon them the attendance for years of their wives and families, if they should die, whilst the collieries and factories are the cause of their being greatly annoyed by a number of vagrants, for whom they were formerly paid, but whom they are now obliged to treat for nothing. They are all, then, of opinion, that no good reasons exist why they should not be remunerated for their labours, by a corresponding, if not an exactly similar scale as is proposed for their southern brethren. They all, save one, state the fact of the very inadequate nature of the payments made to them.

In the Durham district there are 27,919 persons, with a workhouse containing, on the average, 115 persons, and two medical officers are paid 48*l.* for travelling over 41,467 statute acres, when called upon by any pauper within that space who may require them; for the relieving officers never refuse to give an order on the doctor, even when they will give nothing else. Whilst at Darlington, there are 21,488 persons, with a workhouse containing, on the average, 161 persons, four doctors are employed, and are paid 171*l.*; they travel over 60,759 acres. Each of the four surgeons at Darlington gets within 5*l.* as much as the two doctors at Durham for half the work, than which nothing can be more strange; and it is evident, there must be a great injustice committed at Darlington or at Durham. If Chester-le-Street is compared with Durham, it will be found that, whilst the two gentlemen there have only half the work to do there is in Durham, they get three farthings a-head more on the population than their Durham brethren; and four gentlemen at Darlington, get three times as much as two at Chester-le-Street. At Glossop, in Derbyshire, one unfortunate surgeon lately rode or walked over 20,807 acres in order to attend on the poor of 14,575 people, and a workhouse, containing on the average 71 persons, for which he received 20*l.*, or less than a farthing a-head on the population. No medical man in these districts can account for such discrepancies in any other way than by referring them to the greater or less liberality and kindness of the Boards of Guardians.

The Poor-Law Commissioners have applied themselves steadily, since the termination of the last poor-law year, to the work of diminishing the extent of the medical districts throughout the northern counties, and merit the confidence of the public for the energy with which they have acted. At Glossop, for instance, they have directed that two surgeons should be employed instead of one; but they have refrained from directing that they should be reasonably paid for their labour, and five pounds only have been added to the twenty granted before; thus making the sum allowed a whole farthing a-head on the population, instead of three-quarters, which, when reduced to a more intelligible result, means, that each gentleman receives as much as a post-boy for

his first ride, and gives his time, his knowledge, and his medicine, for the future, into the bargain. If the same energy which has been authoritatively employed, in many instances with so much advantage, had fortunately been also directed towards the proper payments to be made to the medical men throughout the country, the sick poor would have had the reality, instead of the semblance of medical relief, which it may be feared is nearly all that is granted to them in many places at present.

In the great towns or townships of the north, such as Manchester, Salford, Liverpool, &c., a great alteration has also taken place with respect to the manner of administering medical relief since 1839, when the reports were made to the Commissioners; and greatly to the disadvantage of the parish surgeon. That the public charities of these great towns do an infinity of good cannot be doubted; but in nearly all of them persons receiving any kind of relief from the parish, are turned over to the parish surgeon, whilst the poor often find it much more convenient to apply to him. In one medical district in Manchester, (and which may be taken as a specimen of the great towns,) containing 34,000 inhabitants, almost exclusively of the labouring class, the new poor-law has been in operation two years. The first half-year the parish surgeon attended 103 persons; in the second, 466; in the third, 562; and in the fourth and last, 651, for the sum of twenty-five pounds each half-year. The work having increased sixfold, whilst the payment remains the same, which is not reasonable.

It will probably be satisfactory to oppose to this statement of a town district in Lancashire, one from a rural district in the West Riding of Yorkshire. In the colliery part, the number of cases during the last three months was 130, for which 6*l.* 5*s.* were paid, being not quite one shilling per case. In the agricultural part of the same district, 16 cases only occurred during the same period, for which 4*l.* were paid, or five shillings per case. In the year ending March, 1841, 973 cases of illness occurred in the whole union. In the year ending March, 1842, 1263 cases occurred, for which the same sum was paid. As each case requires six visits on the average, the allowance for each, in the colliery district, is two-pence, out of which medicines are to be

found, horses and toll-bars to be paid for. A little consideration will satisfy reasonable persons that the poor cannot receive the care all good men would desire, unless the system under which these things are done, is changed.

The Poor-Law Commissioners are fully sensible of this evil, and have, in their last Annual Report, made the following statement for the information of the House of Commons:—"We have in general resisted the disposition of the guardians to reduce the remuneration of the medical officers; indeed, we think that in many parts of the country, instead of the salaries of the medical officers demanding reduction, their rates are too low to enable the medical officer, consistently with a fair remuneration for his labour and expenditure, to bestow upon his pauper patients the amount of care and medicines which the guardians profess to ensure them by a medical order."

In the Report of the Committee on the Poor-Law Amendment Act of 1838, ordered to be printed by the House of Commons, on the 7th August, 1838, the opinion of the Committee on the subject, is stated in the Seventh Resolution:—"That the administration of medical relief to the poor has been in many respects amended under the new law, but that there is still room for further improvement; that the medical districts, in some instances, seem to be inconveniently large; that they should be of such a size as to admit an easy access of the medical man to his patients; and that the remuneration should be such as to insure proper attention and the best medicines."

Five years have elapsed since this Report was made to the House of Commons, and so far from the remuneration having been augmented to such point as to ensure proper attention and the best medicines, it has been shown that, during the last two years, whilst the labour has been increasing, it has diminished, is diminishing in the present, and will diminish, in spite of the opinion so fairly and honestly expressed by the Poor-Law Commissioners in their last Report, unless the House of Commons shall be pleased to vindicate their own resolution, by strengthening their hands, and by directing them to see that it is effectively carried out in every part of England and Wales.

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